

I apologize for not answering this via the given questions, but I just got this email today. My major suggestions for health care reform:

- 1) Use more APN's
- 2) GET RID OF THE WRITTEN COLLABORATIVE AGREEMENT REQUIREMENT for APNs (Sorry to shout, more comment below.)
- 3) Rather than be focus on the lack of obstetricians, or that obstetricians are fleeing the state or limiting their practice, support/encourage the use of midwives for low risk women. This single change could make a significant impact on how much Illinois spends on health care.

I am a CNM in private practice. I am closing my practice and moving to Canada next fall, where I can work unhindered by the written collaborative agreement, which is one of many barriers to my practice. Details are here:

<http://urbanmidwife.wordpress.com/2010/11/01/big-news/>.

My c section rate is 7%, my preterm birth rate is less than 5%, and 90+% of my patients breastfeed exclusively for at least six weeks. All of these were done at a fraction of the cost of a hospital birth for a low risk mother and infant. Multiply one case by the number of women I've cared for since 2005, and you may begin to get an idea of how much my care costs vs the average ob/hospital based practice.

Another reason that I'm moving is for free or low cost health care. Because of a pre existing condition, I've been without health insurance for most of the past five years. My option is a high risk state insurance plan that would cost 25% of my take home income for catastrophic care only. This would be in addition to my normal prescription costs and doctor visits.

Thank you for doing what you are doing. It's my hope that residents of Illinois will have affordable health care soon.

Regards-

Jennifer Gagnon, CNM, MSN